

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	6/27/01
2	✓	✓	1/11/02
3	✓	✓	6/3/02
4	✓	✓	7/16/03
5	✓	✓	7/16/03
6	✓	✓	7/16/03
7	✓	✓	N N
8	✓	✓	N N
9	✓	✓	N N
10	✓	✓	N N
11	✓	✓	N N
12	✓	✓	N N
13	✓	✓	N N
14	✓	✓	N N
15	✓	✓	✓ O
16	✓	✓	✓ O
17	✓	✓	✓ O
18	✓	✓	✓ O
19	✓	✓	✓ = =
20	✓	✓	✓ = =
21	✓	✓	✓ = =
22	✓	✓	✓ = =
23	✓	✓	✓ ✓ ✓
24	✓	✓	✓ ✓ ✓
25	✓	✓	✓ ✓
26	✓	✓	✓ ✓
27	✓	✓	✓ ✓
28	✓	✓	✓ ✓
29	✓	✓	✓ ✓
30	✓	✓	✓ ✓
31	✓	✓	✓ ✓
32	✓	✓	✓ ✓
33	✓	✓	✓ ✓ ✓
34	✓	✓	✓ ✓ ✓
35	✓	✓	✓ ✓ ✓
36	✓	✓	✓ ✓ ✓
37	✓	✓	✓ ✓
38	✓	✓	✓ ✓
39	✓	✓	✓ ✓
40	✓	✓	✓ ✓
41	✓	✓	✓ ✓
42	✓	✓	✓ ✓
43	✓	✓	✓ ✓
44	✓	✓	✓ ✓
45	✓	✓	✓ ✓
46	✓	✓	✓ ✓
47	✓	✓	✓ ✓
48	✓	✓	✓ ✓
49	✓	✓	✓ ✓
50	✓	✓	✓ ✓

Claim	Final	Original	Date
51	✓	✓	✓
52	✓	✓	✓
53	✓	✓	✓
54	✓	✓	✓
55	✓	✓	✓
56	✓	✓	✓
57	✓	✓	✓
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75	✓	✓	✓
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89	✓	✓	✓
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92	✓	✓	✓
93	✓	✓	✓
94	✓	✓	✓
95	✓	✓	✓
96	✓	✓	✓
97	✓	✓	✓
98	✓	✓	✓
99	✓	✓	✓
100	✓	✓	✓

Claim	Final	Original	Date
101	✓	✓	✓
102	✓	✓	✓
103	✓	✓	✓
104	✓	✓	✓
105	✓	✓	✓
106	✓	✓	✓
107	✓	✓	✓
108	✓	✓	✓
109	✓	✓	✓
110	✓	✓	✓
111	✓	✓	✓
112	✓	✓	✓
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124	✓	✓	✓
125	✓	✓	✓
126	✓	✓	✓
127	✓	✓	✓
128	✓	✓	✓
129	✓	✓	✓
130	✓	✓	✓
131	✓	✓	✓
132	✓	✓	✓
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136	✓	✓	✓
137	✓	✓	✓
138	✓	✓	✓
139	✓	✓	✓
140	✓	✓	✓
141	✓	✓	✓
142	✓	✓	✓
143	✓	✓	✓
144	✓	✓	✓
145	✓	✓	✓
146	✓	✓	✓
147	✓	✓	✓
148	✓	✓	✓
149	✓	✓	✓
150	✓	✓	✓

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

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